

Chemical Dependency Resource Team

GUIDE TO COMMUNITY RESOURCES

FOR

CHEMICAL DEPENDENCY TREATMENT

The C.D.R.T. does not guarantee the services listed and provides this guide as information only.

Please phone the Chemical Dependency Resource Team Secretary @ 875-4788

if the number you reached is no longer in service or incorrect.

Thank you.

January 2000 (resource guide)

BRIEF DESCRIPTION OF TREATMENT OPTIONS

Detoxification Centres

For many people, a brief stay in a detoxification centre is the first step in the treatment process. Detoxification centres offer a safe, supportive, live-in environment for withdrawal from the intoxicating effects of alcohol or other drugs. Referrals to detoxification centres are made by outpatient counsellors, friends or families, clergy, social workers, and health care professionals. You can also refer yourself.

Once you have been admitted, you will be cared for by a team of professional staff. A doctor is available daily and emergency care that may be necessary is provided by hospitals in the area. The need for continued care in the detoxification unit is assessed daily. The length of stay varies greatly depending on your needs. Discussion groups and other programs including orientation to available treatment services and information on chemical dependency are provided to help you prepare for the follow-up you will need after discharge.

To avoid disappointment or delay, please be sure to call first to make sure a bed is available. Sometimes it is necessary to wait for a bed. Your continued interest will assist entry.

Outpatient Counselling Services

If you have concerns about your use of alcohol or drugs, you can ask an outpatient counselling centre for information and advice. Most clinics offer an education program to give people more information about the use and misuse of alcohol and drugs. Following the educational program you may decide to make an appointment for a detailed look at your own situation. When you come into the centre, professionally trained staff will provide a complete assessment, discussing particular concerns with you and any family members who wish to attend.

Following assessment, you and your counsellor might decide that you could benefit from some additional support through one of the many special programs which might include: individual therapy, couple and family counselling, group counselling, assertiveness training, special programs for youth, activity groups, and a variety of other services.

Depending upon your needs, you could be involved in outpatient treatment for one to three months, although more time can be arranged as needed. Sometimes assessment will point out a need for residential treatment. Staff work closely with other agencies and will refer you if necessary.

There is no charge for outpatient counselling.

Support Recovery Homes

Often the use of Alcohol and Drugs can erode many aspects of life that were previously taken for granted. If you suffer from poor physical health, have lost the support of your family, or the security of a job, you may need to spend time in a supportive

recovery home. These homes provide a longer program which offers you the chance to regain your health while benefiting from the support and assistance of other people with similar problems.

During your stay, you will learn how to deal with the stresses of life without relying on alcohol or other drugs. As you become healthier and start rebuilding your life, you will be encouraged to learn new skills and interests, explore job opportunities and become involved with others in the community.

Support Recovery Homes serve as good places to make informed decisions about further recovery. Staff can arrange for referrals to more intense residential treatment centres.

Residential Treatment Centres

Individuals who still have some stability in their lives, attachment to employers, family or friends, might benefit from a stay in a residential treatment centre. These facilities offer a short, intensive program, usually four to six weeks long. You will learn about alcohol and other drugs, how they affect you, and other ways of dealing with the stresses of life.

The staff will offer individual counselling as well as group therapy sessions and a variety of other programs designed to meet your needs. Since your family may also have been affected by your drug abuse over the years, they will be encouraged to participate in the treatment program.

Day Programs

In some areas day programs are available to persons with chemical dependency as well as those who have grown up with problems related to alcohol and drugs. The programs provide group therapy and lifeskill training in a group format. Specialized groups dealing with women's issues are also available. Access to day programs is by referral through outpatient clinics, physician, counsellors and mental health teams)

Funding

Support recovery homes generally cost the client \$17.50 per day. Residential treatment centres generally cost \$975 per month. If you cannot afford this charge, you might be eligible for assistance through your company's Employee Assistance Program or subsidies through one of the ADS outpatient clinics. The Ministry of Human Resources funds those eligible for income assistance. An outpatient counsellor can help you find out more about funding.

O	ut	pa	tier	it S	ervi	ces

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	(604)254-9060 Vancouver V6A 1G9
Aboriginal Family Services 594 East 15th Ave.,	Therefore A. C. C. C. Annual Albert College and A. C.
660-0515 Vancouver	Perspective Substance Abuse Services 314 - 6th Street
	522-3722 New Westminster V3L 3A6
Action: Alcohol & Drug	
Counselling Service	R.A.D.A.T. (Richmond) 170-5720 Minoru Blvd
roblem Gambling Counselling	270-9220 Richmond V6X 2A9
Sunshine Coast Needle Exchange Box 2647, 5686 Dolphin St	요즘 그 그 그는 사람들은 경우를 가는 것이 되었다.
85-5680 Sechelt V0N 3A0	Sea to Sky Community Services Society
	(604)892-2267 38142 2 nd Ave
Iternatives #117-3721 Delbrook Avenue	Squamish V0N 3G0
84-0255 North Vancouver V7N 3Z4	(604)894-6101 #2-7433 Prospect St
	Pemberton, V0N 2L0
B.C. Construction Rehab. Plan 17101-317 Columbia Street	(604)932-3312 Ste.23 - 1212 Alpha Lake Rd
21-8611 New Westminister, V3L 3V6	Whistler, VON 1B1
Surnaby Clinics:	Sea View A & D Clinic #203-1760 Marine Drive
Burnaby Addiction Services #285-9600 Cameron St.	926-9260 West Vancouver V7V 1J4
21-2228 Burnaby, V3J 7N3	
Surnaby North Team	Seniors Well Aware Program 3rd Floor-411 Dunsmuir
60-0602 #102-4430 Halifax, Burnaby, V5C 5R4	687-7927 Vancouver V6B 1X4
Burnaby South East Team	524-8994 Burnaby
60-9494 #101-7645 Kingsway, Burnaby, V3N 3C7	524-8998 New Westminster
oquitlam Clinic 1112 Austin Avenue	Sheway 455 East Hastings
31-3110 Coquitlam, V3K 3P5	254-9951 Vancouver V6A 1P5
Day Treatment Program	Squamish A & D Services 38142 2 nd Ave.
D.E.W. 202-1193 Kingsway Vancouver, V5V 3C9	(604)892-5791 Squamish V0N 3G0
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE	Ministry of Children & Families Addiction Services Vancouver
Delta (North) A & D Program #205-11861 - 88th Ave.	660-3082 City Centre Team (Net 1) 1505 Robson Street
91-1185 Delta V4C 3C6	660-0515 Downtown East (Net 2) 594 East 15th Avenue 775-1822 North East Team (Net 3) 5050 Joyce Street
Delta (South) A & D Program 5694-12th Ave.	664-0174 Westside Team (Net 4) 3 rd floor, 2110 W43rd.
Oelta (South) A & D Program 5694-12th Ave. 43-8610 Delta V4L 1C4	660-6868 Midtown Team and South Vancouver (Net 5 & 6)
	#105-5550 Fraser Street
EYAS Needle Exchange 221 Main St.,	659-1144 Downtown South 1065 Seymour Street
85-6561 Vancouver V6A 2S7	775-0049 North East Team (Net 3) 3455 Victoria Drive
DEYAS Alcohol & Drug Program 223 Main St.,	Watari 301-877 East Hastings Street
85-7300 Vancouver, V6A 2S7	254-6995 Vancouver V6A 3T1
oual Diagnosis 520 Powell St.,	Wellness Centre (Seniors) 112-1657 Martin Drive
55-9843 Vancouver, V6A 1G9	535 - 4526 White Rock V4A 6E7
Iey-Way'-Noqu' (Healing Circle) #206-33 East Broadway	
74-1831 Vancouver V5T 1V4	Youth Programs
ndian Homemakers' Association of BC 251 E 11th Ave.	
76-0944 Vancouver V5T 2C4	
	Burnaby MCF Integrated Youth Services Centre
ative Courtworker & Counsellor Association	660-6536 #100-6446 Nelson, Burnaby, V5H 3J5
87-0281 50 Powell Street	
Voncentrary V6A 1E0	DEVAS (Vouth Detox) 430 East Heatings St.

Vancouver V6A 1E9

Vancouver Native Health

D.E.Y.A.S. (Youth Detox)

251-7615

255-9766

449 E. Hastings St

Vancouver V6A 1P5

430 East Hastings St.

Vancouver V6A1P7

520-3587	109 Ash S New Westminster, V3M 3M
Nexus (24 years & under)	575 Drake Stree
660-5216	Vancouver V6B 4K
Odyssey 1	518 Howard Stree Burnaby V5B 3R
Odyssey 2 879-8853	2875 St.George S Vancouver V5T 3R
Pacific Legal Education Society 871-0450	3894 Commercial S Vancouver, V5N 4G
Plea (Support Recovery) (Youth)	n e jetka je sah
(604)891-1082	Vancouve
Peak House (Youth)	2427 Turner Stre
253-3381 Fax 253-3581	Vancouver, V5K 2E
Watari Youth Day Program (M/	W) (ages 13-24)
Watari Youth Day Program (ND) 438-3722	Vancouv
Youth Detox (Downtown East) 251-7615	432 East Hastings Stre Vancouver V6A 1F
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Sea-to-Sky In-Home Detox Program Adults 19 or older 88075 Second Ave. 892-9215/1-800-785-7370 Squamish

Detoxification Centres

Vancouver Detox Centre 377 East 2nd Avenue 660-6656 Vancouver V5T 1B9

Cordova Detox (Harbourlight) 119 East Cordova 682-3674 Vancouver V6A 1K8

Maple Cottage Detox Centre 9 East Columbia 660-9787 New Westminster V3L 3V5

The Fraser Valley

Adept Services 882 Maple Street 538-2522 White Rock, V4B 4M2

202-9180 King George Hwy. Astra (Family/Children) 951-4867 Surrey, V3V 5W1

Chilliwack Alcohol and Drug Services #103-46165 Yale Rd. East (604)793 - 4450 Chilliwack, V2P 2P2

Hope Alcohol & Drug Program 432 Wallace Street (604) 869-2466 Hope, V0X 1L0

33063 - 4th Avenue Fraser House Outpatient Clinic 826-6810 Mission, V2V 1S6

Langley A & D Services 5339 - 207th Street 534-7921 Langley, V3A 2E6

Maple Ridge Alcohol & Drug Outpatient Clinic

22477 Lougheed Hwy 467-5179 Maple Ridge, V2X 2T8

Street Health Outreach Program (24 hrs)

N. J. . FERRING

10667 - 135 A Street Needle Exchange 583-5999 Surrey, V3T 4E3 (clinic 583-5666)

2420 Montrose Street **Substance Abuse Services** Abbotsford, V2S 3S9 (604) 850-5106

Surrey Alcohol & Drug Outpatient Clinic 204-13630 72nd Ave. (604)501-8244 Surrey, V3W 2P3

13719-72 Avenue **Surrey Delta Immigration Services** 597-0205 Surrey, V3W 2P2

Support Recovery Homes

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Central City Lodge(Men)	415 West Pender	No.
681 - 9111	Vancouver, V6B 1V2	Renaissand
		930-5898(w
Charlford House (Women)	6845 Kitchener Street	580-5866 (1
420 - 4626	Burnaby, V5B 2J8	
		Resurrection
Choices Recovery House(Men)	1702 East 33rd Avenue	464-0475
325 - 6994	Vancouver, V5N 3E2	
		Rising Sun
Comox Valley Recovery Centre(M		(604) 951-7
(250) 338 - 7144	Courtenay, V9N 3C3	
		Safe Haven
Cornerstone Manor (Men)	10068 & 10078 - 133 Street	(formerly N
589 - 6060	Surrey, V3T 3Y5	572-6688
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Cwengitel Society (Men)	14128 Park Drive	Step By Ste
588 - 5561	Surrey	591-3153, P
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Glory House (Women)	1522 Pitt River Road	Surfside Re
464 - 0472	Port Coquitlam, V3C 1P2	(250) 758 -
Image Passyon House (Mon) 837 Miller Avenue	Surrey Rec
Innervisions Recovery House (Men 939-1420		• 1
	Coquitlam, V3J 4K7	572-8672
Intake number as well as drug and ale	conormitormation.	
www.pbsco.com/innervisions		Together W
		451-9854
Integrity House	그러 그 이번 여러보다 폭락했다.	
596-7776 (intake for both houses)		Turning Po
(Men)	13477 - 60th Ave.	875 - 1710
	Surrey	and the second of the second o
(Women)	14451 - 81 A. Ave.,	Turning Po
The control of the co	Surrey	303 - 6717
A comment of the second sections of	4A-+++	
Lana House (M/W)	407 Kelly Street	Union Gosp
290-6663	New Westminister, V3L 3T7	251-1424
Last Door (Men)	323 - 8th Street	Unity House
525 - 9771	New Westminster, V3M 3R3	588-3595
Liz's House (women/methadone)		Wagner Hil
(604) 583-2502	Surrey, V5X 2X9	856-9432
Lydia Home (Women)	(Union Gospel Mission)	We Can (M
(604) 826-4868	Mission, B.C.	325-0512
Mission Harmony House Society(W		Westminste
(604) 826-9210	Mission, V2V 5X4	524 - 5633
,00 ty 020-2210	11110010H, V Z V 0714	-224 - 3033
New Dawn (Women)	720 E. King Edward	
	Vancouver, V5V 2E2	
325 - 0576	vancouver, V3 V ZEZ	
Very Hone Deservery Control Men	4711 Gothard St.,	
New Hope Recovery Centre(Mcn)		
709-8069	Vancouver, V5T 2L7	

Phoenix House(Men)	10379-133A Street
583-7166	Surrey, V3T 4A1
Quality Recovery Society (Men) 572 - 9494	14357-70A Avenue Surrey, V3W 0X5
Renaissance House (Methadone) 930-5898(women) 580-5866 (men)	Surrey
Resurrection House(Men) 464-0475	1559 Grant Ave. Port Coquitlam, V3B 1P1
Rising Sun House(Men)	9490 - 152 nd . Street
(604) 951-7906	Surrey, V3R 4G3
Safe Haven Homes Inc. (Men) (formerly New Step Recovery House) 572-6688	13574-79A Ave. Surrey, V3W 6S5
Step By Step (Women) 591-3153, Pager: 667-2393	Surrey
Surfside Recovery House (Men)	2368 Rosstown Road
(250) 758 - 5611/758 - 2253	Nanaimo, V9T 3R7
Surrey Recovery House (Men)(Meth 572-8672	adone) _ Surrey
Together We Can (Men)	5255 Fairmont St.
451-9854	Vancouver, V5R 3V4
Turning Point (M/W)	455 West 13th Avenue
875 - 1710	Vancouver, V5Y 1W4
Turning Point (Men)	10411 Odlín Rd.
303 - 6717	Richmond, V7C 2W1
Union Gospel Mission (Men)	616 East Cordova Street
251-1424	Vancouver, V6B 3V8
Unity House (M/W)(Methadone)	13847-108 Ave.
588-3595	Surrey, V3T 2K9
Wagner Hills Farm (Men 19 and olde	er) 8061-264 Street, RR.6
856-9432	Langley, V3A 4P9
We Can (Men)	7410 Elliot St.,
325-0512	Vancouver
Westminster House (Women)	228 - 7th Street
524 - 5633	New Westminster, V3M 3K5

Support Recovery Homes B.C. Interior

Belaire Women's Society (250) 860-7156

202-1610 Bertram St., Kelowna, V2P 2G4

Harmony House (Women) (250) 763-6544	2360 Ethel St., Kelowna, V1Y 8T3	Peardonville House (Women) 29 856 - 3966	491 Huntington Road, R.R.1 Abbotsford V2S 1M3
Kiwanis House Rehabilitation Centre (Men) 101 Columbia St.	Victoria Life Enrichment	211 - 101 Island Highway
(250) 374-6551	Kamloops, V2C 2S7	Society(M/W) (250) 381 - 4343	Victoria V9B 1E8
McKenzie House (M/W) (250)765-5229	610 McKenzie Rd., Kelowna, V1X 2B1		out Windshift (as)
Madsen House (M/W) (250)765-9179	435 Madsen Rd., Kelowna, V1X 2C3	Native Residential Treat	tment Facilities
New Attitudes (Men)	1471 Sutherland Ave.,		
(250) 717-0980	Kelowna, V1Y 5Y4	Kakawis Family Development Centre (250) 725 - 3951	Box 17, Meares Island Tofino V0R 2Z0
Residential Treatment	Facilities	Ktunaxa/Kinbasket Wellness Centre (250) 428-5516	RR 1, Site 7 Box 17 Creston V0B 1G0
		Nengayni Treatment Centre Society (250) 989-0301	Box 2528 Williams Lake, V2G 4P2
Aurora Centre (Women)	4500 Oak Street	Nimpkish Treatment Centre	P.O. Box 290
875-2032	Vancouver, V6H 3N1	(250) 974-5522	Alert Bay VON 1A0
Crossroads Treatment Centre (M/W) 860 - 4001	123 Franklyn Road Kelowna, V1X 6A9	Round Lake Centre (250) 546 - 3077 Grandview Flat	R.R. 3, Comp 10 s, North Armstrong V0E 1B0
Edgewood (M/W) 751-0111	2121 Boxwood Road Nanaimo, V9S 4L2	Tsow-Tun- Le Lum Society (250) 390 - 3123	P.O. Box 370 Lantzville V0R 2H0
Harbour Light Recovery Centre (Men) 682-5208	119 E. Cordova Street Vancouver, V6A 1K8	Wilp Si'satxw Community Healing C (250) 849 - 5211	entre Box 429, Kitwanga, B.C. V0J 2A0
Harbour Light Centre (250) 563-6819	835-3rd Avenue Prince George, V2L 3C7	14 - 27 - 17 - 17 - 17 - 17 - 17 - 17 - 17	
ફેફ્કોમી કો ફક્કમાર્થી લેવા છે. જો જો	975 West 57th Avenue	Self-Help/Mutual Sup	port Groups
Homestead (Women) 266 - 9696	Vancouver V6P 3Z9		
		AA	434 - 3933

31250 King Road, R.R. 1 Abbotsford V2S 1M3

22269 Calligan Avenue

Maple Ridge V2X 2E2

14100 Stave Lake Road Mission V2V 4J5

2000 - 15th Avenue

Prince George V2M 1S2

1755 East 11th Avenue

No. 10 Hwy, Cloverdale,

Vancouver V5N 1Y9

19030 - 56 Ave.,

Kinghaven Treatment Centre

Maple Ridge Treatment Centre

Miracle Valley Treatment Centre

(604) 864 - 0039

(604) 826 - 6681

Nechako Centre

(250) 565 - 2387

Pacifica (M/W)

(604) 576-6466

Path to Freedom(Men) (Punjabi, Hindi, English)

872 - 5517

467 - 3471

ACOA 222 - 1605 Alano Club, North Shore 987 - 4141 Alano Club, Vancouver 736 - 5110 Alanon, Vancouver 688 - 1716 Alateen, Vancouver 688 - 1716 Avalon Recovery Centre (Women) Vancouver: 263 - 7177 North Shore: 913 - 0477 **Cocaine Anonymous** 662 - 8500 **Co-Dependency Anonymous** 515 - 5585 DAMS (Women) 687 - 5454

Emotions Anonymous	681 - 5653	Serenity Shop	129 W. 3 rd Ave.
Gamblers Anonymous	685 - 5510	987-8726	North Vancouver V7M 2E4
Narcotics Anonymous	873 - 1018	Alcohol & Drug	Information
Naranon	878 - 8844		
Nicotine Anonymous	889 - 5335	Referral Service: Lower Mainland	660 - 9382
Overeaters Anonymous	878 - 4575	Outside Lower Mainland	1 - 800 - 663 - 1441
Rational Recovery	324 - 9629	Prevention Source B.C. Vancouver	(504) 974 - 9452
Sexaholics Anonymous	875 - 6381	Internet	(604) 874 - 8452 www.preventionsource.bc.ca
Smokers Anonymous	889 - 5335		
Survivors of Incest Anonymous	263 - 7177	Smoking Cessation Progra	n Methods and ms
Vancouver Recovery Club	708 - 9955		

Commercial Health Clinic 874 - 3445	2703 Commercial Dr. Vancouver, V5N 4C5
Gardell & Associates 436-1636 (250) 753-5455	3617 Kingsway Vancouver, V5R 5M1 #4 - 10 Commercial St., Nanaimo, V9R 5G2
Health Quest 877-8580 877-8580 599-4321	#714-750 W. Broadway Vancouver, V5Z 1H6 Richmond Surrey
Lower Mainland Drug Freedom	319 Columbia Street

Jackson-Murray Consultants	;	
Polaris Methadone Program		#305-46165 Yale Rd.,
702-1110		Chilliwack, V2P 2P2

Royal Oak Clinic	2127A Kingsway
438-6184	Vancouver, V5N 2T4

Self-Help Literature

Fresh Start Group Support Program of 8 sessions over 4 weeks through the Canadian Cancer Society 565 West 10th Ave. (604) 253-8470 ext. 238 Elizabeth G. Vancouver, V5Z 4J4 872 - 4400 or

1 (888) 939-3333 Toll Free Cancer Information Line

Breath-Free to Stop Smoking 8 sessions emphasizing positive lifestyle modification through the Seventh Day Adventist Church (604) 853-5451 ext. 417 Ruth L.

Disclaimer

The Chemical Dependency Resource Team at Vancouver Hospital and Health Sciences Centre acknowledges that this list of resources is not fully comprehensive. It represents those services that may be some use to patients and serves as a resource to health care providers.

The C.D.R.T. does not guarantee the services listed and provides this guide as information only.

Please contact the Chemical Dependency Resource Team Secretary at 875-4788, if the number you reached is no longer in service, or incorrect. Thank you.

520-1068

New Westminister, V3M 1A9

The Chemical Dependency

Resource Team

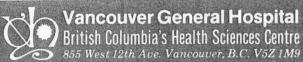
is funded by the Ministry of Labour and Consumer Services, Alcohol and Drug Programs. It is administered under the jurisdiction of the Vancouver General Hospital.

chemical

RESOURCE PROGRAM









■ WHAT IS CHEMICAL DEPENDENCY?

Dependency is said to exist when the use of chemical substances such as alcohol, marijuana, prescribed and non-prescribed drugs causes problems in one or more of the following areas of your life: health, family, employment, legal.

■ WHO IS THE SERVICE FOR?

- Patients admitted to VGH identified as having chemical dependency related problems.
- Family members or co-dependents of those patients.

■ HOW TO CONTACT SERVICE?

Referral is required through the Physician and Members of the Healthcare Team: Physicians, Nurses, Social Workers, Physiotherapists, Occupational Therapists and Dieticians. The Chemical Dependency Resource Team will then be contacted by a member of the Healthcare Team for possible follow-up (875-4788).

■ WHO WILL RESPOND?

The Chemical Dependency Resource Team is an inter-disciplinary team consisting of a Social Worker, Clinical Nurse Specialist and Physician.

SERVICES AVAILABLE

■ CONSULTATION

Consultation services (informal or formal) available at the request of the Attending Physician and other members of the Healthcare Team.

■ ASSESSMENT

All patients and/or significant others are interviewed and assessed by a member of the Chemical Dependency Resource Team.

■ COUNSELLING

Patients and their significant others are counselled according to their specific needs during hospitalization.

COMMUNITY LIAISON

Referral is made to appropriate treatment agencies and self-help groups in and out of the Vancouver area.

EDUCATION

Educational sessions for all members of the Healthcare Team, Patients and their significant others, and community groups are offered.

DEFENCES THAT DISABLE

If you have been given this pamphlet it is probable that the health care professional who gave it to you is inviting you to learn more about the disease of chemical dependency. Chemical dependency exists when the use of chemical substances (such as alcohol, cocaine, marijuana, heroin and prescription drugs etc.) causes problems in one or more of the following areas of your life, health, family, employment or legal. The key to knowing whether chemical dependency exists is no mystery. A dependency exists when harm is evident in the presence of continued use of the drug. Repeated use in the face of negative consequences is the major indicator.

The process of recognizing that a drug or alcohol problem exits can be a confusing one. Many people have learnt to adjust to the harmful presence of a substance use in their lives by talking themselves into believing that the problem does not exist, or at best is of minor significance. This is commonly called "denial", and is present in most stages of a chemical dependency. "Denial" is only a means to protect oneself from harsh realities. Rationalization or self-protection are other ways to describe the same thing. The following are some common strategies that people with chemical dependency use unknowingly to defend themselves. Unfortunately, these defences stop the person from recognizing that a problem exists, leaving them to proceed to more disabling problems, and continued deterioration.

1. Complete Self Protection (Denial)

"Absolutely not". In effect the person denies that any form of problem exists, and practices unregulated using. No attempt at control is made. Control may be considered after some form of disruption, but controls are often subtle, only changing the pace of consumption and not the overall amount. In effect no real change is intended or accomplished.

2. Minimizing

"Yes, I use but I'm not that bad". The person has some vague awareness that something is wrong, but resents being asked about alcohol or drug intake. The quantity of intake may be modified, but not permanently. Restriction on time of day, and on certain days of the week etc., may be employed, but if change happens it is only slight.

3. Rationalizing

"Yes, I use, "because marijuana is okay" or "I only use beer" or "I never use needles". The person is, in general, slightly uncomfortable - however wishes to continue. Attempts to control the type of drugs used are common. The user may

switch from hard liquor to beer or from IV cocaine to snorting. It has not registered that mood altering drugs themselves activate the disease of chemical dependency. Extra controls may be employed. For example stopping alcohol and using Valium, or stopping cocaine in favour of prescriptions and alcohol. The person may try to stop some drugs in favour of others.

4. Blaming

"Yes, I use because of my job" or "because of you" or "I need something to help me relax" or "to help me get through". Comparisons are very common "yes, I use but I am not as bad as" The person now feels somewhat guilty and wishes to spread responsibility. Control behaviours include periods of self-imposed abstinence with a view to use at a later date. The mistaken belief is that they can somehow prove that control will return after abstinence. This proof of control is hard work and does not last over the long-term.

5. Partial Acceptance

"Yes, I use, and I will stop". The person now realizes that change is needed - however is reluctant to follow an organized program of recovery. Control behaviours include self-imposed abstinence but no change in lifestyle. "I will do it on my own". "It is all a question of willpower". The life style choices continue to demand the use of alcohol and drugs. There is short-term improvement assisted by abstinence that may occur, only to slowly give way to frustration and continued use.

6. Full Acceptance

"Yes, I use and I am responsible for my recovery". The person fully recognizes that lifestyle and psychological change is needed to secure abstinence. The decision is made to abstain permanently. At the same time a program of recovery is accepted and undertaken. Abstinence is long lasting. They learn about their illness to help them with changes in their thinking and lifestyle change. Sobriety is obtained with abstinence plus an attitude and lifestyle improvement.

^{*} This handout was written by Tom Shenton M.S.W. based on clinical experience with Chemical Dependent patients at Vancouver General Hospital, as well as discussion with Terence Gorski in 1995 and Chapter 3 of "Learning to Live Again", Miller, Gorski and Miller, Herald House/Independency Press, 1992.

Vancouver General Hospital

CHEMICAL DEPENDENCY RESOURCE TEAM PROGRAM GOALS AND OBJECTIVES

- 1. Provide an interdisciplinary clinical service specializing in the assessment, intervention and referral of chemically dependent patients and their families to community treatment and resources.
- 2. Provide education and training programs to health care personnel in the identification, diagnosis and management of chemical dependency and related health care problems.
- Ongoing development and implementation of the program to address the attitude/awareness, knowledge and skills of Health Care Professionals regarding chemical dependency.
- Maintain and promote a clinical service in a tertiary care facility which addresses the diagnosis and management of chemical dependency problems.
- 5. Liaise with and promote positive professional relationships with existing community personnel both in the acute care hospital and post discharge regarding patient resources and outcome.
- 6. Engage in and be proactive in fostering QA activities and research projects pertinent to the field of chemical dependency.

CHEMICAL DEPENDENCY RESOURCE TEAM

PHILOSOPHY

Chemical dependency is believed to be a primary, progressive, chronic and fatal disease. Dependency exists when the use of the chemical(s) causes problems in the areas related to health, family, employment, and legal, and despite negative consequences, the use continues. Other indicators of dependence include loss of control, compulsion, and a change in tolerance. In due time chemically dependent persons suffer from the physical destructive use of the drugs. The toxicity of their disease creates a defensive lifestyle which causes a form of sincere delusion, which in turn, renders those affected to lose touch with reality and become incapable of spontaneous insight to seek remedial care.

Chemical dependency is a family disease where family members are co-dependent, and if not treated, become ineffective to help themselves or the chemically dependent individual. The co-dependents often become "enablers" of the disease process and require treatment as well.

There exists extensive misunderstanding of the magnitude of the problem and the harmful nature of chemical dependency. This misconception contributes to the incidence of the disease and its progression to more serious stages.

During a patient's stay at Vancouver General Hospital, the destructive course of their chemical dependency can be successfully intervened upon by the Chemical Dependency Resource Team. We believe the treatment for chemical dependency occurs in the community setting with the hospital service being the critical first step. It is believed that a supportive, non-judgmental approach coupled with education and appropriate community resource planning can save many lives and prevent much needless suffering.

We believe the effectiveness and the success of the Chemical Dependency Resource Team stems from its inter-disciplinary membership. The composite skills present from the disciplines of medicine, social work and nursing combine to deliver a strongly integrated service to the individual patient, family, professional staff and the community.

Empowerment of the greater numbers of health care professional through awareness, knowledge, and skills are the key ingredients to combat chemical dependency in the hospital setting.

Philosophy for the Treatment of Patients with Substance Use at Vancouver Hospitals

PURPOSE

The hospitals in Vancouver have committed to articulating the philosophy for the treatment of patients with substance use, particularly injection use. The goals of such treatment are to facilitate complete and adequate medical treatment of the patient's admitting diagnosis while also recognizing and addressing (assessing, educating about and planning for) the underlying substance use disorder. The hospitals further aim:

- to affirm their commitment to treat patients with respect and dignity,
- to provide optimal patient care for these patients throughout the hospital system,
- to support hospital and community health care providers in providing optimal services and care, and
- to develop a consistency in the philosophical and clinical approach to these patients.

PHILOSOPHY

We believe:

- that substance use disorder has biological, psychological and social components for which effective treatment options are available,
- that all patients and staff will be treated with respect and dignity,
- that optimal hospital care includes recognizing and addressing substance use disorders
 including avoidance of unplanned withdrawal in hospital and provision of adequate pain
 management,
- that the social, mental health, emotional and health care needs of patients must be met through an interdisciplinary team approach,
- that all patients have the right to health information and should be made aware of the substance use treatment options, in a non-judgmental manner, including the effects of refusing or delaying treatment, and when applicable, access to information regarding reproductive risk and choices,
- that a harm reduction approach, encompassing the continuum of options from abstinence through substance use management, addresses social and medical aspects directed to reducing drug related harms to patients and the community as a whole,
- that patient should be advised to stop use of street and other non-prescribed drugs while in hospital to minimize diagnostic dilemmas and treatment complications,
- that the patient's decision regarding accepting or declining treatment should be treated respectfully, and
- that the patient is ultimately accountable for decisions about themselves and should be encouraged to participate in their care plan.

October 23, 1996

Source: COUTH 1998